

COVER PAGE

FEB - 3 2015

Please type or print in ink.

CG

NAME OF FILER (LAST) (FIRST) (MIDDLE)
McQuaid Margaret ALBANY CITY CLERK

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Albany
Division, Board, Department, District, if applicable
Your Position
City Council member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: City of Albany Position: Oversight Board to Successor Agency

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2. Jurisdiction of Office (Check at least one box)

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County County of _____
- City of City of Albany Other _____

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2014, through December 31, 2014.
- Leaving Office: Date Left ____/____/____ (Check one)
- or- The period covered is ____/____/____, through December 31, 2014.
- The period covered is January 1, 2014, through the date of leaving office.
- Assuming Office: Date assumed 12 / 08 / 2014
- The period covered is ____/____/____, through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

- Check applicable schedules or "None." ► Total number of pages including this cover page: 1
- Schedule A-1 - Investments - schedule attached
 - Schedule C - Income, Loans, & Business Positions - schedule attached
 - Schedule A-2 - Investments - schedule attached
 - Schedule D - Income - Gifts - schedule attached
 - Schedule B - Real Property - schedule attached
 - Schedule E - Income - Gifts - Travel Payments - schedule attached
- or-
- None - No reportable interests on any schedule

5. [Redacted Signature Area]

I have used all reasonable diligence in preparing this statement. The information herein and in any attached schedules is true and complete. I acknowledge and certify under penalty of perjury under the laws of the State of California that the information provided is true and correct.

Date Signed 02/03/2015
(month, day, year)